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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Valencia	
	your government-issued picture identification (for example, your driver's license or passport).		First name	First name
		nse or passport).	Middle name	Middle name
	Bring your picture		Simpson Owens	
	mee	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-0673	

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Case number (if known)

Debtor 1 Valencia Simpson Owens

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
	doing business as names	EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		463 W 129th Place Chicago, IL 60628			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
5.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Valencia Simpson Owens

Case number (if known)

7.	The chapter of the Bankruptcy Code you are							uals Filing for Bankruptcy
	choosing to file under	(Form 2010)). Also, go to the top of page 1 and check the appropriate box.☐ Chapter 7☐ Chapter 11						
		_	hapter 12					
			•					
		- C	hapter 13					
В.	How you will pay the fee		about how yo	u may pay. Typically, attorney is submitting	lf, you may pay with cash	r local court for more details n, cashier's check, or money n a credit card or check with		
				the fee in installmer e in Installments (Offic		this option, sig	gn and attach the Applica	ation for Individuals to Pay
			-	·	,	this option only	v if vou are filing for Char	oter 7. By law, a judge may,
		_	but is not requapplies to you	uired to, waive your fe ur family size and you	e, and may do so are unable to pay	only if your inc	come is less than 150% of	of the official poverty line that this option, you must fill out
9.	Have you filed for	□ No	 D.					
	bankruptcy within the last 8 years?	■ Ye						
			District	ND IL Ch 7	When	6/02/11	Case number	11-23416
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	S.					
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your	□ No	o. Go to li	ne 12.				
	residence?	■ Ye	es. Has yo	ur landlord obtained a	n eviction judgme	ent against you	?	
				No. Go to line 12.				

		Document	Page 4 of 60	
Debtor 1	Valencia Simpson Owens		Case number (if known)	

Par	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busi	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code		
	separate sheet and attach it to this petition.		Check	k the appropriate box	k to describe your business:		
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	No.	I am r	ot filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	1 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Anv	Hazardo	ous Property or Any	Property That Needs Immediate Attention		
	Do you own or have any			. , ,	. ,		
1-7.	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code		

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Debtor 1 Valencia Simpson Owens

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 60 Case number (if known) Debtor 1 **Valencia Simpson Owens** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Valencia Simpson Owens Signature of Debtor 2

Executed on

MM / DD / YYYY

Valencia Simpson Owens Signature of Debtor 1

Executed on April 5, 2018

MM / DD / YYYY

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Debtor 1 Valencia Simpson Owens

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	J Winter	Date	April 5, 2018	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Daniel J W	/inter 6208223			
Law Office	es of Daniel J Winter			
Firm name				
53 W Jack	son Boulevard			
Suite 718				
Chicago, I	L 60604			
Number, Street,	City, State & ZIP Code			
Contact phone	312-427-1613	Email address	djw@dwinterlaw.com	
6208223 IL	_			
Bar number & S	tate			

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Debtor 1 Valencia Simpson Owens Case number (if known) Part 6: Answer These Questions for Reporting Purposes 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. □ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do □ 1,000-5,000 **25,001-50,000** 1-49 you estimate that you □ 5001-10,000 50,001-100,000 □ 50-99 owe? □ 10.001-25.000 ☐ More than 100.000 □ 100-199 □ 200-999 19. How much do you □ \$0 - \$50,000 ☐ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million ☐ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 ☐ \$1,000,001 - \$10 million ☐ \$500;000,001 - \$1 billion estimate your liabilities ☐ \$10,000,001 - \$50 million ☐ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. ljunderstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, Signature of Debtor 2 Valencia Simpson Owens Signature of Debtor 1 Executed on C Executed on MM / DD / YYYY MM / DD / YYY

		1700.111116	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Valencia Simpso	n Owens		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(II KHOWH)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	56,830.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	56,830.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	19,654.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	43,251.00
	Your total liabilities	\$	62,905.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,269.25
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,019.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 10 of 60 Case number (if known) Debtor 1 Valencia Simpson Owens

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9,206.17

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clai	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			Document	Page 11 of 60		
Fill in	this inforr	mation to identify yοι	r case and this filing:			
Debtor	r 1	Valencia Simps	on Owens			
	•	First Name	Middle Name	Last Name		
Debtor	r 2					
(Spouse	, if filing)	First Name	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the	NORTHERN DISTRICT OF	ILLINOIS		
Case r	number _					☐ Check if this is an
						amended filing
Offic	sial Ea	rm 106A/B				
Sch	nedul	e A/B: Pro	perty			12/15
In each	category, s	eparately list and descr	ibe items. List an asset only once	e. If an asset fits in more than o	one category, list the asset in	the category where you
informa		e space is needed, attac	rate as possible. If two married p h a separate sheet to this form. C			
Part 1:	Describe	Each Residence, Buildi	ng, Land, or Other Real Estate Yo	u Own or Have an Interest In		
1. Do y	ou own or h	nave any legal or equita	ole interest in any residence, build	ding, land, or similar property?		
■ N	o. Go to Par	t 2				
_						
Ц 16	es. vvnere is	s the property?				
Part 2:	Describe	Your Vehicles				
3. Cars □ N ■ Y	0	ucks, tractors, sport	utility vehicles, motorcycles			
3.1	Make:	Chevy	Who has an interest	in the property? Check one		laims or exemptions. Put
	Model:	Camaro	■ Debtor 1 only			ed claims on Schedule D: ims Secured by Property.
	_	2013	Debtor 2 only		Current value of the	
	Approximat		☐ Debtor 1 and Debt	or 2 only	entire property?	Current value of the portion you own?
	Other inforn	nation:	☐ At least one of the	,		
[-	fair cond	ition				
			☐ Check if this is co	ommunity property	\$10,000.00	\$10,000.00
L			(see instructions)			
Exar N Y Add page Part 3:	mples: Boa o es d the dolla ges you ha	ts, trailers, motors, per ar value of the portion ave attached for Part Your Personal and Hou	ATVs and other recreational sonal watercraft, fishing vessels by you own for all of your entrice. Write that number here	s, snowmobiles, motorcycle a	occessories	\$10,000.00 Current value of the
, , ,		, .g		, and the second		portion you own?
						Do not deduct secured
						claims or exemptions.

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Valencia Simpson Owens Document Page 12 of 60 Case number (if known)	Desc Main
■ Yes.	Describe	
	1 room of household goods and furnishings	\$500.00
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music coincluding cell phones, cameras, media players, games Describe	ellections; electronic devices
	phone, tv and computer	\$400.00
Examp ■ No	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles Describe	or baseball card collections;
Examp ■ No	ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments Describe	nd kayaks; carpentry tools;
□ No	ns ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe Smith & Wesson gun for job	\$700.00
☐ No	s oles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe clothes	\$100.00
☐ No	y bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go Describe	old, silver
	costume jewelry	\$100.00
Exam ■ No □ Yes.	rm animals bles: Dogs, cats, birds, horses Describe her personal and household items you did not already list, including any health aids you did not list	
■ No □ Yes.	Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$1,800.00

Official Form 106A/B Schedule A/B: Property page 2

Document Page 13 of 60 Debtor 1 Case number (if known) **Valencia Simpson Owens** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **PNC** \$10.00 17.1. checking Checking & Fifth/Third Bank -overdrafted \$0.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Deferred Compensation-City of Chicago** \$25,000.00 Pension 403(b) Plan- City of Chicago Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

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Debtor 1	Valencia Sir	npson Ov	vens	Document		Case number (if known)	
☐ Yes	ls	suer name	and descript	ion.			
	ts in an educati C. §§ 530(b)(1),			n a qualified ABLE pro	ogram, or under a qua	alified state tuition pro	ogram.
■ No □ Yes	lr	stitution na	me and desc	ription. Separately file th	ne records of any intere	ests.11 U.S.C. § 521(c):	
■ No	, equitable or fu			rty (other than anythin	g listed in line 1), and	d rights or powers exe	ercisable for your benefit
Examp ■ No	ples: Internet dor	nain names	s, websites, p	ets, and other intellecture roceeds from royalties a		nts	
☐ Yes.	Give specific inf	formation al	bout them				
Examµ ■ No	ses, franchises, ples: Building per Give specific int	mits, exclu	sive licenses	ngibles , cooperative association	n holdings, liquor licen	ses, professional licens	es
Money or	property owed	to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
29. Family <i>Exam</i> µ □ No	support	lump sum	alimony, spo	cluding whether you alre		·	settlement
				d support arrears ov husband	ved by former		\$10,000.00
■ No □ Yes.	benefits; un Give specific int	ges, disabilit paid loans formation policies	ty insurance you made to	payments, disability bend someone else			
□ No	•			nealth savings account (HSA); credit, homeowi	ner's, or renter's insurar	nce
■ Yes.	Name the insura		iny of each pany name:	olicy and list its value.	Beneficia	ry:	Surrender or refund value:
		NY L	ife- Whole	Life	Son & D	Daughter	\$10,000.00
		City	of Chicago	o-on job-Term	Son & E	Daughter	Unknown
If you				someone who has die t proceeds from a life in		currently entitled to rece	eive property because

Official Form 106A/B Schedule A/B: Property page 4

Dak	Doc	cument	Page 15 of	60	Desc Main
Det	valencia Simpson Owens			Case number (if known)	
	Yes. Give specific information				
	Claims against third parties, whether or not you have Examples: Accidents, employment disputes, insurance of No Yes. Describe each claim			nd for payment	
	Workers comp	ensation cla	im vs. City of C	chicago (from 2014)	Unknown
	Other contingent and unliquidated claims of every na No	ture, includin	g counterclaims o	of the debtor and rights to	set off claims
	Yes. Describe each claim				
_	Any financial assets you did not already list ■ No				
	Yes. Give specific information				
36.	Add the dollar value of all of your entries from Part for Part 4. Write that number here			es you have attached	\$45,030.00
Part	5: Describe Any Business-Related Property You Own or H	ave an Interest I	n. List any real esta	te in Part 1.	
37. [Oo you own or have any legal or equitable interest in any bus	siness-related p	operty?		
	No. Go to Part 6.				
	Yes. Go to line 38.				
Part	6: Describe Any Farm- and Commercial Fishing-Related Policy of the If you own or have an interest in farmland, list it in Part 1.	roperty You Ow	n or Have an Interes	t In.	
46.	Do you own or have any legal or equitable interest in	any farm- or o	ommercial fishin	g-related property?	
	■ No. Go to Part 7.	•			
	☐ Yes. Go to line 47.				
Part	7: Describe All Property You Own or Have an Interest	in That You Dic	Not List Above		
53.	Do you have other property of any kind you did not a Examples: Season tickets, country club membership	Iready list?			
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part	7. Write that n	umber here		\$0.00
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$10,000.00		
57.	Part 3: Total personal and household items, line 15		\$1,800.00		
58.	Part 4: Total financial assets, line 36		\$45,030.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line	52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$56,830.00	Copy personal property to	otal \$56,830.00
63.	Total of all property on Schedule A/B. Add line 55 +	ine 62			\$56,830.00

Official Form 106A/B Schedule A/B: Property page 5

		17(7(.1))))	1 700. 10 01 00	
Fill in this inform	nation to identify your	case:		
Debtor 1	Valencia Simpsoi	n Owens		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
1 room of household goods and furnishings	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
phone, tv and computer	\$400.00		\$400.00	735 ILCS 5/12-1001(b)	
Life from Schedule PAD. 1.1			100% of fair market value, up to any applicable statutory limit		
Smith & Wesson gun for job Line from Schedule A/B: 10.1	\$700.00		\$700.00	735 ILCS 5/12-1001(d)	
Elle Holli Schedule PAB. 10.1			100% of fair market value, up to any applicable statutory limit		
clothes Line from Schedule A/B: 11.1	\$100.00			735 ILCS 5/12-1001(a)	
Line from Scriedule Arb. 11.1			100% of fair market value, up to any applicable statutory limit		
costume jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
EIRO HOITI GONEGUIE PVD. 12-1			100% of fair market value, up to any applicable statutory limit		

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Case number (if known)

76	valencia Simpson Owens				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
	checking: PNC Line from Schedule A/B: 17.1	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Checking & Savings: Fifth/Third Bank -overdrafted	\$0.00		\$200.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Deferred Compensation-City of Chicago	\$25,000.00			40 ILCS 5/8-244, 5/9-228, 5/14-147
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Pension: 403(b) Plan- City of Chicago	Unknown			40 ILCS 5/8-244, 5/9-228, 5/14-147
	Zino nom osinodato / v. Z. Z v. Z			100% of fair market value, up to any applicable statutory limit	
	Child support arrears owed by former husband	\$10,000.00			735 ILCS 5/12-1001(g)(4)
	Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit	
	NY Life- Whole Life Beneficiary: Son & Daughter	\$10,000.00			215 ILCS 5/238
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	City of Chicago-on job-Term Beneficiary: Son & Daughter	Unknown			215 ILCS 5/238
	Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	Workers compensation claim vs. City of Chicago (from 2014)	Unknown			820 ILCS 305/21
	Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property covered No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ Vas				

Case 1	18-10168	Doc 1	Filed 04/06/1		ed 04/06/18 16:0 8 of 60	09:26 Desc	Main
Fill in this information	າ to identify yoເ	ır case:	1217111111111111	1 11111	., .,, .,,,		
Debtor 1 Va	alencia Simps	on Owens					
	st Name		ddle Name	Last Name			
Debtor 2 (Spouse if, filing) First	st Name	Mic	ddle Name	Last Name			
United States Bankrup	tcy Court for the	NORTH	HERN DISTRICT OF I	LLINOIS			
Case number(if known)						_	ck if this is an nded filing
Official Form 10		: Who I	Have Claims	Secure	ed by Property	V	12/15
Be as complete and accu	rate as possible.	If two marrie	ed people are filing toge	ther, both are e	equally responsible for sup On the top of any addition	pplying correct inform	
. Do any creditors have	claims secured by	y your prope	rty?				
☐ No. Check this b	oox and submit t	his form to t	the court with your other	er schedules.	You have nothing else to	report on this form.	
■ Yes. Fill in all of			,		· ·	•	
		bciow.					
	ured Claims				. Column A	Column B	Column C
2. List all secured claims for each claim. If more that much as possible, list the	an one creditor has	a particular	claim, list the other credite	ors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Exeter Finance	e Corp	Describe t	he property that secure	s the claim:	value of collateral. \$19,654.00	claim \$10,000.00	If any \$9,654.00
Creditor's Name			evy Camaro				
Po Box 166008 Irving, TX 7501		As of the dapply.	late you file, the claim is	S: Check all that			
Number, Street, City, S	tate & Zip Code	Unliquio					
Who owes the debt? C	heck one	☐ Dispute	d lien. Check all that apply	,			
☐ Debtor 1 only ☐ Debtor 2 only	nock one.	_	eement you made (such a		ecured		
☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)							
■ At least one of the debtors and another □ Judgment lien from a lawsuit							
☐ Check if this claim re community debt	lates to a	Other (i	ncluding a right to offset)				
Date debt was incurred	Opened 03/15 Last Active 10/16/17	Las	t 4 digits of account number	mber 1001			

\$19,654.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$19,654.00 Write that number here:

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Date debt was incurred 10/16/17

	543C 10 10100 B00	Document	Page 19 of 60	20 Beso Main
Fill in this info	ormation to identify your case:			
Debtor 1	Valencia Simpson Ow	ons		
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the: NO	RTHERN DISTRICT OF ILL	INOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Schedule	rm 106E/F E/F: Creditors Who			12/15
any executory or Schedule G: Exe Schedule D: Cre eft. Attach the C name and case i	ontracts or unexpired leases that contracts or unexpired Leatory Contracts and Unexpired Leators Who Have Claims Secured Econtinuation Page to this page. If your page (if known).	ould result in a claim. Also li eases (Official Form 106G). D by Property. If more space is r ou have no information to rep	Y claims and Part 2 for creditors with NONI st executory contracts on Schedule A/B: P o not include any creditors with partially se needed, copy the Part you need, fill it out, r port in a Part, do not file that Part. On the to	Property (Official Form 106A/B) and on secured claims that are listed in number the entries in the boxes on the
	All of Your PRIORITY Unsecu			
	ditors have priority unsecured clair	ns against you?		
No. Go t	o Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORITY Un	secured Claims		
3. Do any cred	ditors have nonpriority unsecured	claims against you?		
☐ No. You	have nothing to report in this part. Su	bmit this form to the court with	your other schedules.	
Yes.				
unsecured of	claim, list the creditor separately for ea	ach claim. For each claim listed	e creditor who holds each claim. If a credito , identify what type of claim it is. Do not list cla have more than three nonpriority unsecured cla	aims already included in Part 1. If more
				Total claim
4.1 Abdu	I Ahead DDS	Last 4 digits of acco	ount number	\$220.00
c/o A	ority Creditor's Name ctivity Collection Service In Iilwaukee Ave	When was the debt	incurred?	
	pect Heights, IL 60070			
	r Street City State Zlp Code	As of the date you f	ile, the claim is: Check all that apply	
Who in	curred the debt? Check one.			
Deb	otor 1 only	☐ Contingent		
☐ Deb	otor 2 only	☐ Unliquidated		
☐ Deb	otor 1 and Debtor 2 only	☐ Disputed		
☐ At le	east one of the debtors and another	Type of NONPRIOR	ITY unsecured claim:	
☐ Che	eck if this claim is for a community	Student loans		
debt		Obligations arisin	g out of a separation agreement or divorce that	at you did not
_	claim subject to offset?	report as priority clair		
■ No		'	or profit-sharing plans, and other similar debts	s
☐ Yes		Other. Specify	Dental Services	

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Debtor 1 Valencia Simpson Owens Case number (if know) 4.2 \$1,500.00 **Advocate Christ Medical Center** Last 4 digits of account number Nonpriority Creditor's Name 4440 W 95th Street When was the debt incurred? Oak Lawn, IL 60453 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Medical ☐ Yes Other. Specify 4.3 **Amsterdam Printing & Litho** Last 4 digits of account number \$265.00 Nonpriority Creditor's Name When was the debt incurred? c/o CCS LLC PO Box 390913 Minneapolis, MN 55439-0901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account ☐ Yes 4.4 **Chase Auto Finance** \$11,267.00 Last 4 digits of account number 5727 Nonpriority Creditor's Name Opened 05/13 Last Active **National Bankruptcy Dept** When was the debt incurred? 8/04/15 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile Deficiency ☐ Yes

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Debtor 1 Valencia Simpson Owens Case number (if know) 4.5 \$330.00 **CMRE Financial Services Inc** Last 4 digits of account number Nonpriority Creditor's Name 3075 E Imperial Hwy #200 When was the debt incurred? Brea, CA 92821-6753 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account ☐ Yes 4.6 **Comenity Bank/Carsons** \$488.00 Last 4 digits of account number 3241 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 12/14 Last Active 9/29/17 Po Box 182125 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.7 Convergent Outsourcing, Inc \$867.00 Last 4 digits of account number 4862 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? **Opened 12/16** Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection T-Mobile Usa ☐ Yes

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Case number (if know)

4.8	Fifth Third Bank	Last 4 digits of account number	\$600.00
	Nonpriority Creditor's Name 38 Fountain Square Plaza Cincinnati, OH 45202	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Overdraft	
4.9	First Resolution	Last 4 digits of account number	\$6,418.00
	Nonpriority Creditor's Name c/o Keith Shindler, Esq 1990 E Algonquin Rd #180 Schaumburg, IL 60173	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Judgement	
4.1 0	HBLC Inc	Last 4 digits of account number	\$4.407.00
0	Nonpriority Creditor's Name		• ,
	2615 Three Oaks Rd	When was the debt incurred?	
	Cary, IL 60013 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify Judgement	

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Last 4 digits of account number

4.1	Ingalls Memorial Hospital (2017)	Last 4 digits of account number	\$150.00						
•	Nonpriority Creditor's Name PObox 27685 Chicago II 60673 1376	When was the debt incurred?							
	Chicago, IL 60673-1276 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
	Yes	Other. Specify Medical							
4.1	Kohls/Capital One	Last 4 digits of account number	0893	\$452.00					
2	Nonpriority Creditor's Name Kohls Credit Po Box 3120 Milwaukee, WI 53201	When was the debt incurred?	Opened 01/15 Last Active 10/06/17	· ·					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Charge Acc	count						
4.1	Midland Funding	Last 4 digits of account number	6522	\$678.00					
	Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 11/13						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	,							
	Debtor 1 and Debtor 2 only								
	At least one of the debtors and another Type of NONPRIORITY unsecured claim:								
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 							
	■ No								
	Yes	■ Other. Specify Bank N.A.							

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☐ Yes

■ No

■ Other. Specify Account

Type of NONPRIORITY unsecured claim:

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Document Page 25 of 60 Case number (if know) Debtor 1 Valencia Simpson Owens 4.1 \$1,800.00 Speedy Cash Last 4 digits of account number Nonpriority Creditor's Name POBox 780408 When was the debt incurred? Wichita, KS 67278-0408 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Loan 4.1 Sullivan Urgent Aid Centers Ltd \$546.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 637565 When was the debt incurred? Cincinnati, OH 45263-7565 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical ☐ Yes 4.1 **Tidewater Finance Co** 6931 \$12.387.00 9 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/11 Last Active 6520 Indian River Rd When was the debt incurred? 1/30/15 Virginia Beach, VA 23464 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Automobile deficiency, 16 AR 37, Lake Co,

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4.2 0	Village of Credtwood	Last 4 digits of account num	\$100.00					
0]	Nonpriority Creditor's Name PO Box 6131	When was the debt incurred		<u> </u>				
	Carol Stream, IL 60197-6131							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the c	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unse						
	_	Student loans						
	☐ Check if this claim is for a community debt		separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	separation agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-s	sharing plans, and other similar debts					
	□ Yes							
4.2	Village of Oak Park	Last 4 digits of account num	-h	\$80.00				
1	Nonpriority Creditor's Name	Last 4 digits of account num	iber	Ψ00.00				
	c/o MSB Parking POBox 10479	When was the debt incurred	?					
	Newport Beach, CA 92658-0479							
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	■ Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:					
	☐ Check if this claim is for a community							
	debt		separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Tickets	1					
Part :	3: List Others to Be Notified About a D	ebt That You Already Listed						
is tr hav	ying to collect from you for a debt you owe to	someone else, list the original credi hat you listed in Parts 1 or 2, list the	that you already listed in Parts 1 or 2. For examp tor in Parts 1 or 2, then list the collection agency additional creditors here. If you do not have add	here. Similarly, if you				
	and Address	On which entry in Part 1 or Part 2 die						
	Amega Inc	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai					
	Seneca St #400 alo, NY 14204-1963		■ Part 2: Creditors with Nonpriority Unsecured	Claims				
Duii	alo, N1 14204-1303	Last 4 digits of account number						
	and Address	On which entry in Part 1 or Part 2 di	· •					
	t Hasenmiller	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai					
	LaSalle Street #2200 ago, IL 60603		Part 2: Creditors with Nonpriority Unsecured	Claims				
Oilio	ago, 12 00003	Last 4 digits of account number						
Name	and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?					
	& Gaines PC	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms				
	Glenn Avenue		■ Part 2: Creditors with Nonpriority Unsecured	Claims				
vvne	eling, IL 60090	Last 4 digits of account number						
	and Address bdul Ahead	On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clai	me				
	Southwest Hwy	Line Tie or (Ondok Ond).	Part 2: Creditors with Priority Unsecured					
	-		— ranz. Oreanors with Northholling Offsecured	Oiuiiio				

Official Form 106 E/F

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Debtor 1 Valencia Simpson Owens

Worth, IL 60482-1008	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
State Collection Svc	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn Bankruptcy PO Box 6250 Madison, WI 53176-0250		Part 2: Creditors with Nonpriority Unsecured Claims
Madison, 111 0017 0 0200	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
T-Mobile Financial	Line 4.7 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 629025 El Dorado Hills, CA 95762		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				·	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f	Student loans	6f.	Т \$	otal Claim
Total claims	OI.	otadent loans	oi.	Ψ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	43,251.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	43,251.00

Fill in this information to identify your case:
Debtor 1 Valencia Simpson Owens
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

		Docume	<u>nt Page 29 of</u>	60	
Fill in th	is information to identify your	case:			
Debtor 1	Valencia Simpo	n Owens			
Debioi i	Valencia Simpso First Name	Middle Name	Last Name		
Debtor 2	•				
(Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nu	mber				— 0
(if known)					Check if this is an
					amended filing
Offici	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
our nan	ne and case number (if known o you have any codebtors? (If). Answer every question.			p of any Additional Pages, write
— 1	es				
	/ithin the last 8 years, have yo ona, California, Idaho, Louisiana				
■ N	lo. Go to line 3.				
_	es. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
	cs. Did your spouse, former spo	use, or regar equivalent live	with you at the time:		
in li Fori	ne 2 again as a codebtor only	if that person is a guarant	or or cosigner. Make su	ire you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	ID 0 . I			editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IF Code		Check all schedule	es that apply:
				_	
3.1	Trevion Woods			☐ Schedule D, li	
				Schedule E/F	, line 4.4
				☐ Schedule G_	
				Chase Auto Fin	ance
3.2	William Owens Jr			Schedule D, li	ine 2.1
	463 W 129th Place			☐ Schedule E/F	
	Chicago, IL 60628			☐ Schedule G	·
				Exeter Finance	

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Eill	in this information to identify your ca	asa.						
	,,	npson Owens						
	otor 2 ouse, if filing)				_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
(If kr	fficial Form 106l						ed filing ent showing postp as of the following	
	chedule I: Your Inc	ome				IVIIVI / DD/ T	TTT	12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp th you, do not include	ouse i	s living v	with you, included in the second with the second your specific second in the second in	ude information ouse. If more spa	about your ice is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing sp	ouse
	If you have more than one job,	Employment status	■ Employed			☐ Emple	oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed		
	employers.	Occupation	Officer					
	Include part-time, seasonal, or self-employed work.	Employer's name	City of Chicago					
	Occupation may include student or homemaker, if it applies.	Employer's address						
		How long employed the	here? 17 years					
Par	Give Details About Mor	thly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for a	any line,	write \$0 in the	space. Include yo	our non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information f	for all e	mployers	s for that perso	on on the lines bel	ow. If you need
					Foi	Debtor 1	For Debtor 2 on non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,	ry, and commissions (be calculate what the monthl	efore all payroll y wage would be.	2.	\$	8,127.17	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

\$ 8,127.17

N/A

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Deb	or 1	Valencia Simpson Owens	-		Case	number (if k	nowi	7)				
	Con	by line 4 here	4.		For	Debtor 1	7.1	7		Debtor 2 o		
5					-			-	· —			
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	50 50 50 51	b. c. d. e. f.	\$ \$ \$ \$ \$ \$ \$ \$	(1.4 0.8 0.0 0.0 0.0	5 3 0 0 0	\$ \$ \$ \$ \$ \$ \$		N/A N/A N/A N/A N/A N/A	
	JII.	Other deductions. Specify: Health insurance Life insurance		п.т	\$ _		1.3 4.8	<u>1</u> 3	ς » —		N/A N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	2,85		_	\$		N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	5,269		_	\$		N/A	
8.	8a. 8b. 8c. 8d. 8e. 8f.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 81 _ 8(c. d. e.	\$_ \$_ \$_ \$_ \$_		0.0 0.0 0.0 0.0	0 0 0 0	\$ \$ \$ \$		N/A N/A N/A N/A N/A	
	8h.	Other monthly income. Specify:	_ 81	h.+	\$		0.0	0 -	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(0.0	0	\$		N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	ţ	5,269.25	+	\$_		N/A =	\$	5,269.25
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep		•	•				chedule J. 11. +		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain lies									ombin	
13.	Doy	you expect an increase or decrease within the year after you file this form	?							m	onthly	y income
		No										
		Yes. Explain: Does not expect income as freelance security gu	ard	l								

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Fill in th	ois infor mation	to identify	our caea:			I		
	nis information					01	and if their in	
Debtor 1	Va	alencia Sin	npson Ov	vens		Che	eck if this is: An amended filing	
Debtor 2							A supplement show	wing postpetition chapter
(Spouse	, it filing)							the following date:
United S	tates Bankruptc	y Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case nu (If knowr								
Offic	cial Form	106J						
	edule J							12/1
informa	complete and ation. If more r (if known).	space is ne	eded, atta	. If two married people ar ich another sheet to this i n.	e filing together, b form. On the top of	oth are eq f any addit	ually responsible fo ional pages, write y	or supplying correct your name and case
Part 1:		Your House	hold					
	this a joint ca							
	No. Go to line		in a senar	ate household?				
	□ No	ebtor 2 live	iii a sepai	ate nousenoid:				
		Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	btor 2.	
2. D o	o you have de	pendents?	■ No					
Do	not list Debtoebtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do	not state the							□ No
de	pendents nam	ies.						Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
o D .			_					☐ Yes
ex	your expens penses of pe	ople other t	han ┌	No Yes				
yo	ourself and yo	ur depende	nts? ⊔	res				
expens	te your exper	ses as of y	our bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the val	ue of such as	aid for with sistance an	non-cash d have ind	government assistance it	you know Your Income		Va a	
(Officia	l Form 106l.)						Your exp	enses
	ne rental or ho syments and a			ses for your residence. In or lot.	nclude first mortgag	e 4.	\$	1,200.00
lf i	not included	in line 4:						
4a	ı. Real estat	e taxes				4a.	\$	0.00
4b				's insurance		4b.	·	0.00
4c				upkeep expenses		4c.	·	0.00
4d				dominium dues our residence , such as ho	me equity loans	4d. 5.	·	0.00

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Dept	Valencia Simpson Owens	Case nur	nber (if known)	-
6.	Utilities:			
-	6a. Electricity, heat, natural gas	6a	. \$	275.00
	6b. Water, sewer, garbage collection		. \$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable		. \$	175.00
	6d. Other. Specify:		. \$	0.00
	Food and housekeeping supplies			400.00
	Childcare and children's education costs	. 8	·	0.00
-	Clothing, laundry, and dry cleaning		. \$	75.00
	Personal care products and services		. \$. \$	
	•			69.00
	Medical and dental expenses		. \$	175.00
	Transportation. Include gas, maintenance, bus or train fa Do not include car payments.	re. 12	. \$	400.00
			· <u> </u>	60.00
	Charitable contributions and religious donations		. \$	500.00
	Insurance.	14	. Ψ	300.00
-	Do not include insurance deducted from your pay or include	ded in lines 4 or 20		
	15a. Life insurance	15a	. \$	250.00
	15b. Health insurance	15b		0.00
	15c. Vehicle insurance	15c	· —	440.00
	15d. Other insurance. Specify:	15d		0.00
	Taxes. Do not include taxes deducted from your pay or inc		. ψ	0.00
	Specify:		. \$	0.00
	Installment or lease payments:		. Ψ	0.00
	17a. Car payments for Vehicle 1	17a	\$	0.00
	17b. Car payments for Vehicle 2	17b	· -	0.00
	17c. Other. Specify:	17c	·	0.00
	17d. Other. Specify:	17d	· —	
	Your payments of alimony, maintenance, and support		. Ф	0.00
	deducted from your pay on line 5, Schedule I, Your Inc		. \$	0.00
	Other payments you make to support others who do n	ome (omolai i omi rooi).	\$	0.00
	Specify:	19	·	0.00
	Other real property expenses not included in lines 4 o			
	20a. Mortgages on other property	20a		0.00
	20b. Real estate taxes	20b		0.00
	20c. Property, homeowner's, or renter's insurance	20c		0.00
	20d. Maintenance, repair, and upkeep expenses	20d		0.00
	20e. Homeowner's association or condominium dues	20e	· -	0.00
			·	
1.	Other: Specify:	21	. +\$	0.00
2.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,019.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any,	from Official Form 106J-2	\$,
	22c. Add line 22a and 22b. The result is your monthly exp		\$	4,019.00
	220. Add into 224 and 225. The result to your monthly exp			4,013.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from	Schedule I. 23a	. \$	5,269.25
	23b. Copy your monthly expenses from line 22c above.	23b	\$	4,019.00
				,
	23c. Subtract your monthly expenses from your monthly	income.		4 050 05
	The result is your monthly net income.	23c	. \$	1,250.25
٠.				
	Do you expect an increase or decrease in your expens			anno ar dagrassa hassi:
	For example, do you expect to finish paying for your car loan within modification to the terms of your mortgage?	i tile year or do you expect your mortgage	payment to incre	ease of decrease decause o
	_			
	■ No. □ Yes Explain here:			

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					•
Fill in this infor	rmation to identify your	case:			
Debtor 1	Valencia Simpso	n Owens			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For	_{m 106Dec} tion About a	n Individua	l Debtor's	Schedules	12/15
If two married p	eople are filing togethe	r, both are equally resp	onsible for supplying	correct information.	
obtaining mone		n connection with a bar			tement, concealing property, or 000, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help you fill	out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
that they ar	alty of perjury, I declare re true and correct. lencia Simpson Ower		x	s filed with this declarat	ion and
	cia Simpson Owens ure of Debtor 1		Signatu	re of Debtor 2	

Date _____

Date April 5, 2018

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Fill in this infor	mation to identify your	case:			
Debtor 1	Valencia Simpsoi	n Owens			
Daldano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official Forr	m 106Dec				
Declarat	tion About a	an Individual	Debtor's Sci	hedules	12/15
f two married pe	eople are filing together	r, both are equally respon	sible for supplying corre	ect information.	
You must file thi	s form whenever you fi	ile bankruptcy schedules	or amended schedules.	Making a false statemen	t, concealing property, or imprisonment for up to 20
	8 U.S.C. §§ 152, 1341, 1		ruptcy case can result in	intes up to \$250,000, or	imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out be	inkruptcy forms?	
■ No					
☐ Yes. N	Name of person				cy Petition Preparer's Notice,
				Declaration, and	Signature (Official Form 119)
	\sim \wedge				
	ity of perjury, I declare e true and correct.	that I have read the sumr	mary and schedules filed	with this declaration an	d
	Data and Control	x X X			
2004	Jun Am	5 2 Mag	X Signature of D	Vahtar 2	
vaienc Signatui	re of Debtor 1		Signature of L	Jenioi Z	
Date	-11/nc/2	018	Date		
Date _	01/00	0.0	Date		

Fill	in this inform	nation to identify you	r case:			
Dei	otor 1	Valencia Simpso	Middle Name	Last Name		
	otor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number				_	Check if this is an amended filing
Sta Be a info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
		,	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married ■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pai	t 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calendar nuary 1 to De	r year: cember 31, 2017)	■ Wages, commissions, bonuses, tips	\$100,134.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Valencia Simpson Owens

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
				☐ Wages, commissions, bonuses, tips	\$-41,830.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
	or the calen anuary 1 to			■ Wages, commissions, bonuses, tips	\$91,432.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
				☐ Wages, commissions, bonuses, tips	\$-28,696.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
	□ No ■ Yes.	Fill in the de	etails.				
				Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
				Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
	or last caler anuary 1 to		31, 2017)	Defaulted pension loan	\$18,373.00		
Pa	art 3: Lis	t Certain Pa	yments You	ı Made Before You Filed for	Bankruptcy		
6.	Are eithe ☐ No.	Neither D individual During the	ebtor 1 nor leprimarily for a 90 days bef	2's debts primarily consumer Debtor 2 has primarily consument a personal, family, or househole ore you filed for bankruptcy, di	umer debts. Consumer debts Id purpose."		01(8) as "incurred by an
		□ No.	Go to line	•			
		☐ Yes	paid that c not include	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for that on 4/01/19 and every 3 years	nts for domestic support oblig his bankruptcy case.	ations, such as child support	and alimony. Also, do
	Yes.	Debtor 1	or Debtor 2	or both have primarily consu	ımer debts.	·	
		■ No.	Go to line	7.			
		□ Yes	include pa	each creditor to whom you pai yments for domestic support o r this bankruptcy case.			

Total amount paid Amount you still owe

Dates of payment

Creditor's Name and Address

Was this payment for ...

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7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partners r more of their voting s	ships of which yo securities; and a	ou are a general partner; corporations ny managing agent, including one fo			
	■ No							
	Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment			
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	■ No□ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name			
	rt 4: Identify Legal Actions, Repossessio							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the case			
	Hblc Inc vs VALENCIA SIMPSON-OWENS	JUDGMENT	COOK COUNTY, 1ST MUNICIPAL		☐ Pending ☐ On appeal ☐ Concluded			
					4,407.77			
	First Resolution Investment Corp~fia Card Services vs VALENCIA SIMPSON 10M1 0175129	JUDGMENT	COOK COUNTY, 1ST MUNICIPAL		☐ Pending ☐ On appeal ☐ Concluded			
					6,418.58			
	Midland Funding LI vs VALENCIA OWENS 14M1125386	CIVIL JUDGMENT	COOK LAW MAC CHICAGO	GISTRATE -	☐ Pending ☐ On appeal ☐ Concluded			
					- 934.00			
	Ehs Christ Hospital & Medical Center vs VALENCIA OWENS, WILLIAM OWENS	JUDGMENT	COOK COUNTY, 1ST MUNICIPAL		☐ Pending ☐ On appeal ☐ Concluded			
					578.50			

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Del	btor 1	Valencia Simpson Owens	Docum	HEHL F	aye 39 0	Case number (if known)	
		•						
10.		n 1 year before you filed for bankru k all that apply and fill in the details be		f your prope	rty repossess	sed, foreclosed,	, garnished, attache	d, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.						
		litor Name and Address	Describe th	e Property			Date	Value of the
			Explain wha	at happened				property
11.	accol	n 90 days before you filed for bank unts or refuse to make a payment b No Yes. Fill in the details.			uding a bank	or financial ins	titution, set off any a	amounts from your
	Cred	litor Name and Address	Describe th	e action the	creditor took		Date action was taken	Amount
40	VA (** 4 1. **			.				- 614 - 6 114
12.		n 1 year before you filed for bankru -appointed receiver, a custodian, o			rty in the pos	session of an a	ssignee for the ben	ent of creditors, a
	_ `	No Yes						
Pai	rt 5:	List Certain Gifts and Contribution	s					
13.	Withi	n 2 years before you filed for bankr	uptcv. did vou a	iive anv qifts	with a total v	alue of more th	nan \$600 per person	?
	— 1	No	, ,, ,	, , , ,				
		Yes. Fill in the details for each gift.	0	h a th a sift a			D-1	Walna
		s with a total value of more than \$60 person	U Descri	be the gifts			Dates you gave the gifts	Value
	Pers Addı	on to Whom You Gave the Gift and ress:						
14.	I	n 2 years before you filed for bankr		jive any gifts	or contributi	ons with a total	I value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or c		ha what way	aantributad		Dates you	Value
	more Char	s or contributions to charities that to than \$600 rity's Name 'ess (Number, Street, City, State and ZIP Code		be what you	contributed		Dates you contributed	Value
Pai		List Certain Losses						
15.	Withi	n 1 year before you filed for bankru mbling?	ptcy or since yo	ou filed for ba	ankruptcy, die	d you lose anytl	hing because of the	ft, fire, other disaster,
	_	No Yes. Fill in the details.						
		cribe the property you lost and	Describe any ir	nsurance cov	verage for the	eloss	Date of your	Value of property
	how	the loss occurred	Include the amo				loss	lost
Pai	rt 7:	List Certain Payments or Transfers	3					
16.	consi	n 1 year before you filed for bankru ulted about seeking bankruptcy or le any attorneys, bankruptcy petition p	oreparing a ban	kruptcy petit	ion?			rty to anyone you
	_				2901101001010	.c. ricco roquirou	your barmaptoy.	
	_	No Yes. Fill in the details.						

Yes. Fill in the details.

Person Who Was Paid

Address Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Valencia Simpson Owens

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Law Offices of Daniel J Winter 53 W Jackson Boulevard Suite 718 Chicago, IL 60604 djw@DWinterLaw.com	Attorney Fees				\$690.00
	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No Yes. Fill in the details.	or to make payments			or transfer any prope	ty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	iness or financial affa e as security (such as t	i irs? he granting of a s			
	Person Who Received Transfer Address	Description and v property transferr			any property or s received or debts xchange	Date transfer was made
	Person's relationship to you					
	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No Yes. Fill in the details.		y property to a s	self-settled t	rust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prop	erty transfer	red	Date Transfer was made
Par	8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	were any financial ac	counts or instru	ments held	in your name, or for yo	our benefit, closed,
	Include checking, savings, money market, or on the houses, pension funds, cooperatives, associated No				hares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of accourtinstrument	cl	ate account was losed, sold, loved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yeacash, or other valuables?	ar before you filed for	bankruptcy, any	y safe depos	sit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?

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22.	Have you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy?	•
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	·		
			turner have made from the starting for	an hald in turnet
23.	Do you hold or control any property that some for someone.	one else owns? include any proper	ty you borrowed from, are storing for,	, or noid in trust
	No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Valu
Par	10: Give Details About Environmental Inform	nation		
For	he purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	• • • • • • • • • • • • • • • • • • • •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental	law, whether you now own, operate, o	or utilize it or use
	Hazardous material means anything an enviror	nmental law defines as a hazardous	s waste, hazardous substance, toxic s	ubstance,
Ren	hazardous material, pollutant, contaminant, or ort all notices, releases, and proceedings that y		n they occurred	
			•	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	·	ironmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Address (Number, Street, City, State and ZIP Code)	Nature of the case	case
Par	11: Give Details About Your Business or Cor	·		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	ny of the following connections to any	business?
	■ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)	
Offici	al Form 107 Statement	of Financial Affairs for Individuals Filing	g for Bankruptcy	page

Best Case Bankruptcy

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	☐ A partner in a partnership				
	☐ An officer, director, or managing executive of a corporation				
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation			
	No. None of the above applies. Go to F	Part 12.			
	Yes. Check all that apply above and fill	in the details below for each business.			
Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed		
Security Guard from home		freelance security-no income in 2018	EIN: From-To 3 years		
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.				
	No Yes. Fill in the details below.				
Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued			

28.

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Debtor 1 Valencia Simpson Owens

Part 12: Sign Below		
are true and correct. I understand that maki	of Financial Affairs and any attachments, and I declare under parties of Financial Affairs and any attachments, and I declare under parties of a false statement, concealing property, or obtaining money parties to \$250,000, or imprisonment for up to 20 years, or both.	, , , ,
/s/ Valencia Simpson Owens		
Valencia Simpson Owens Signature of Debtor 1	Signature of Debtor 2	_
Date April 5, 2018	Date	_
Did you attach additional pages to <i>Your Sta</i> ☐ No	tement of Financial Affairs for Individuals Filing for Bankrupto	cy (Official Form 107)?
■ Yes		
	s not an attorney to help you fill out bankruptcy forms?	
■ No		W I E
☐ Yes. Name of Person Attach the Ba	ankruptcy Petition Preparer's Notice, Declaration, and Signature (C	ifficial Form 119).

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152,1341, 1519, and 3571.

Valencia Simpson Owens

Signature of Debtor 2

Signature of Debtor 1

Date 2

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 protection from creditors
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$690.00 toward the flat fee, leaving a balance due of \$3,310.00; and \$58.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: April 5, 2018	5	
Signed:		
/s/ Valencia Simpson Owens	/s/ Daniel J Winter	
Valencia Simpson Owens	Daniel J Winter 6208223	
	Attorney for the Debtor(s)	
Debtor(s)		
Do not sign this agreement if the amou	ints are blank.	

Local Bankruptcy Form 23c

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$690.00 toward the flat fee, leaving a balance due of \$3,310.00; and \$58.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 04/05/2018 Signed:	
Valencia Simpson Owens	Danie J Winter 6208223 Attorney for the Debtor(s)
Debtor(s)	

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

Valencia Simpson Owens		Case No.				
	Debtor(s)	Chapter	13			
DISCLOSURE OF COMPENS.	ATION OF ATTOR	NEY FOR DE	CBTOR(S)			
rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that mpensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
For legal services, I have agreed to accept		\$	4,000.00			
Prior to the filing of this statement I have received		\$	690.00			
Balance Due		\$	3,310.00			
310.00 of the filing fee has been paid.						
e source of the compensation paid to me was:						
■ Debtor □ Other (specify):						
e source of compensation to be paid to me is:						
■ Debtor □ Other (specify):						
I have not agreed to share the above-disclosed compensation	ation with any other person u	inless they are memb	pers and associates of my law firm.			
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; e. [Other provisions as needed] 						
agreement with the debtor(s), the above-disclosed fee do	es not include the following	service:				
C	CERTIFICATION					
	reement or arrangement for p	payment to me for re	epresentation of the debtor(s) in			
ril 5, 2018	/s/ Daniel J Winter	•				
	Daniel J Winter 62 Signature of Attorney Law Offices of Dai 53 W Jackson Bou Suite 718 Chicago, IL 60604 312-427-1613 Fax djw@dwinterlaw.c	08223 niel J Winter alevard :: 312-663-1312				
	DISCLOSURE OF COMPENS Insuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), mpensation paid to me within one year before the filing of rendered on behalf of the debtor(s) in contemplation of or For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due 310.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): If have not agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names return for the above-disclosed fee, I have agreed to rende Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, stateme Representation of the debtor at the meeting of creditors at Representation of the debtor in adversary proceedings and [Other provisions as needed]	Debtor(s) DISCLOSURE OF COMPENSATION OF ATTOR arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorne impensation paid to me within one year before the filing of the petition in bankruptcy, or rendered on behalf of the debtor(s) in contemplation of or in connection with the bank. For legal services, I have agreed to accept. Prior to the filing of this statement I have received. Balance Due 310.00 of the filing fee has been paid. The source of the compensation paid to me was: The Debtor of the compensation to be paid to me is: The Debtor of the specify): The source of compensation to be paid to me is: The Debtor of the above-disclosed compensation with any other person used to share the above-disclosed compensation with a person or persons with copy of the agreement, together with a list of the names of the people sharing in the context of the debtor's financial situation, and rendering advice to the debtor in determination and filing of any petition, schedules, statement of affairs and plan which representation of the debtor in adversary proceedings and other contested bankruptcy [Other provisions as needed] Agreement with the debtor(s), the above-disclosed fee does not include the following of the skruptcy proceedings. The Daniel J Winter 62 Signature of Attorney Law Offices of Da 53 W Jackson Bot Suite 718 Chicago, IL 60604 312-427-1613 Fax	Disclosure of Compensation of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid rendered on behalf of the debtor is safe to the filing of this statement I have received \$ Balance Due \$ 310.00 of the filing fee has been paid. Be source of the compensation paid to me was: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are memled I have agreed to share the above-disclosed compensation with a person or persons who are not members copy of the agreement, together with a list of the names of the people sharing in the compensation is attained in the agreed to share the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy of the adversary and the debtor in determining whether to Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor in adversary proceedings and other contested bankruptcy matters; [Other provisions as needed] Agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION CERTIFICATION The provisions as needed and the following service: CERTIFICATION CERTIFICATION CHARTON CHARTON			

United States Bankruptcy Court Northern District of Illinois

In re	Valencia Simpson Owens		Case No.			
		Debtor(s)	Chapter	13		
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors: 2				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	April 5, 2018	/s/ Valencia Simpson Owens Valencia Simpson Owens Signature of Debtor				

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United States Bankruptcy Court Northern District of Illinois

TOT CHACLE DISCLASS OF AUTHORS							
In re	Valencia Simpson Owens	Dobton(s)	Case No.	42			
		Debtor(s)	Chapter	13			
	VERIFI	CATION OF CREDITOR MA	ATRIX				
		Number of 0	Creditors: _	28			
The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.							
Date:	04/05/2018	Valencia Simpson Owens Signature of Debtor	Sus				

Case 18-10168 Doc 1 Filed 04/06/18 Entered 04/06/18 16:09:26 Desc Main Document Page 59 of 60

ABC Amega Inc Abdul Ahead DDS Advocate Christ Medical Center 500 Seneca St #400 c/o Activity Collection Service Inc 4440 W 95th Street Buffalo, NY 14204-1963 664 Milwaukee Ave Oak Lawn, IL 60453 Prospect Heights, IL 60070 Blitt & Gaines PC Amsterdam Printing & Litho Blatt Hasenmiller c/o CCS LLC 10 S LaSalle Street #2200 661 Glenn Avenue PO Box 390913 Chicago, IL 60603 Wheeling, IL 60090 Minneapolis, MN 55439-0901 Comenity Bank/Carsons Chase Auto Finance CMRE Financial Services Inc. Attn: Bankruptcy Dept National Bankruptcy Dept 3075 E Imperial Hwy #200 201 N Central Ave Ms Az1-1191 Brea, CA 92821-6753 Po Box 182125 Phoenix, AZ 85004 Columbus, OH 43218 Convergent Outsourcing, Inc. Dr Abdul Ahead Exeter Finance Corp Po Box 9004 7441 Southwest Hwy Po Box 166008 Renton, WA 98057 Worth, IL 60482-1008 Irving, TX 75016 Fifth Third Bank First Resolution HBLC Inc 38 Fountain Square Plaza c/o Keith Shindler, Esq 2615 Three Oaks Rd 1990 E Algonquin Rd #180 Cincinnati, OH 45202 Cary, IL 60013 Schaumburg, IL 60173 Kohls/Capital One Ingalls Memorial Hospital (2017) Midland Funding Kohls Credit PObox 27685 2365 Northside Dr Ste 300 Chicago, IL 60673-1276 Po Box 3120 San Diego, CA 92108 Milwaukee, WI 53201 Portfolio Recovery Pulmonary & Sleep Associates Inc QVC Po Box 41067 POBox 688 c/o FMA Alliance Norfolk, VA 23541 Mokena, IL 60448-0688 POBox 65 Houston, TX 77001 Speedy Cash State Collection Svc Sullivan Urgent Aid Centers Ltd POBox 780408 Attn Bankruptcy PO Box 637565 Wichita, KS 67278-0408 PO Box 6250 Cincinnati, OH 45263-7565 Madison, WI 53176-0250

Tidewater Finance Co

6520 Indian River Rd

Virginia Beach, VA 23464

Village of Credtwood PO Box 6131

Carol Stream, IL 60197-6131

T-Mobile Financial

El Dorado Hills, CA 95762

PO Box 629025

Village of Oak Park c/o MSB Parking POBox 10479 Newport Beach, CA 92658-0479